i.	Jun P. E00	4:37PM Fay	Sharpe FART B	- FFF(S)	TDAN	ISMITTAI	No.4885	5 P. 2/4	
ž	\# <u>#</u>	this form, together v	vith applicable	fee(s), to:	Mail (	Mail Stop ISSUE Commissioner fo P.O. Box 1450 Alexandria, Virg (571)-273-2885			
Indi	TRUCTAL	m should be used for train respondence including the below or directed otherwise is.	namitting the ISSU Patent, advance on a in Block 1, by (a	IF FEE and ders and noti ) specifying t	u new co	rrespondence undress	; and/or (b) indicating a s	eparate "Pisis ADD)	KBSS"
:		P. ADURESS (Note: Use Block   fin	r any change of address)			iccie) Transmittal Th	mailing can only be used is certificate cannot be use al paper, such as an assign c of mailing or transmission	オ しっと さいく かけかき りゃくか	CTIPS OF VI
.:	Patrick R. Roche	90 05/18/2006 1, Minnich & McKee, l nuc	LLP			hereby certify that the States Postal Service and addressed to the Mai ransmitted to the USP	rtificate of Mailing or Tra us Fee(s) Transmittal is be with sufficient postage for i Stop ISSUE FEE addre TO (571) 273-2885, on the	ing deposited with the	envelo
	Cleveland, OII 44114-2518					Cathryn Inches			sitor's nam (Signatur (Dat
Ė	APPLICATION NO.	FILING DATE	<del></del>	FIRST NAMEI	INVENT	- //-	ATTORNBY DOCKET NO.	CONFIRMATIO	N NO
<u> </u>	09/706,430	11/03/2000	<u>t '</u>	Sudhen		<del></del>	XXT-063 (D/AO130)	6566	14 140.
iji Pas Di	APPLN, TYPE			ie	PUBLICATION FEE		TOTAL FEE(S) DUE	DATEDUI	ŝ
į	nonprovisional					\$0	\$1400	08/18/2006	6
	EXAM					SS-SUBCLASS	]	00 010033 00==-	
	PHAM, THIERRY L		2625			358-001130	1006 TBESHAH2 000000	130 240037 09	70643
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  It is no name of a single firm (having as a member a registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agents) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will uppear on the patent. If an assignee is identified below, the document has bee recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
	A) NAME OF ASSIGN Xerox Corpo	CE CE		(B) RESIDER	NCE: (CF	TY and STATE OR C	OUNTRY)		
lea:	se check the appropriate	assignee category or catego	ries (will not be pri	nted on the pa	itent):	☐ Individual 🛎 Co	rporation or other private g	roup entity Li Gov	/cmmc
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  A phylication Fee (No small entity discount permitted)  Advance Order - # of Copies  4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpation of the fee of the phylical fee of the physical fee								edit any overpayments	ո <b>է (</b> o
. [	a. Applicant claims SI	(from status indicated above	s) 37 CFR 1.27.	⊔b. Applica	int is no le	onger claiming SMAL	.L ENTITY status. See 37 (	CFR 1.27(g)(2).	
The I NOT inten	Director of the USPTO i E: The Issue Fee and Peest as shown by the reco	s requested to apply the Issuablication Fee (if required) with rds of the United States Pate	ne Fee and Publicati vill not be as Cepted out and Trademark (	on I'ee (if any from unyone Office.	y) or to re- other than	apply any previously the applicant, a regis	paid issue fee to the application of attorney or agent; or	ation identified abov the assignce or other	vc. □ party
•	uthorized Signature	Patrick R. Rot	the	<u> </u>		Date	// /06 29,580		
This to ap subm this f Box	collection of information plication. Confidentiality alting the completed aportion and/or suggestions 1450, Alexandria, Virgina 22313-1	n is required by 37 CFR 1.3 by is governed by 35 U.S.C. plication form to the USP1' for reducing this burden, shais 22313-1450. DO NOT S	11. The information 122 and 37 CFR 1. (). Time will vary disculd be sent to the SEND FEES OR CO	is required to 14. This colle lepending upo Chief Information OMPLETED	o obtain of oction is con on the ind ation Offi FORMS	r retain a benefit by the stimated to take 12 m stimated to take 12 m cer, U.S. Patent and 7 TO THIS ADDRESS	ne public which is to file (ar inutes to complete, includi mments on the amount of t frademark Office, U.S. Dep SIMD TO: Commissione	nd hy the USPTO to ng gathering, prepar ime you require to comment of Comment of Comment for Patents, P.O. Re	process ing, an complet rce, P.C ox 1450



## FAY, SHARPE, FAGAN, MINNICH & McKEE, LLP 1100 SUPERIOR AVENUE, SEVENTH FLOOR CLEVELAND, OHIO 44114-2518

Telephone: (216) 861-5582 Facsimiles: (216) 241-1666 and (216) 241-5147

Please call us immediately at (216) 861-5582 if this transmission is incomplete or illegible.

DATE:

TO:

U.S. Patent and Trademark Office

ATTENTION:

ISSUE FEE

FACSIMILE NO.:

571.273.2885

FROM:

Patrick R. Roche, Reg. No. 29,580

U.S. Patent Application
U.S. Serial No. 09/706,430; filed 11/03/2000
Attorney Docket No. D/A0130 (XXT-063)
XER 2 00540

Total Number of Pages (including this cover sheet)  $\underline{4}$ 

## PART B- FEE(S) TRANSMITTAL (IN DUPLICATE)

## "FEE ADDRESS" INDICATION FORM

The documents accompanying this facsimile transmission include information from the firm of Fay, Sharpe, Fagan, Minnich & McKee, LLP that might be legally privileged and/or confidential. The information is intended for the use of only the individual or entity named on this cover sheet. If you are not the intended recipient, any disclosure, copying, or distribution of these documents, or the taking of any action based on the contents of this transmission, is prohibited. If you have received this transmission in error, these documents should be returned to this firm as soon as possible, and we ask that you notify us immediately by telephone so we can arrange for their return to us without cost to you.

## Pest Available Copy